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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Polilli et al.

Application No: 10/723,996

Art Unit: 3626

Filing Date: November 26, 2003

Examiner: Not Yet Assigned

For: Methods and Systems for Providing
Juvenile Insurance Product with
Premium Waiver Features

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Applicants respectfully submit herewith an Information Disclosure Statement (IDS), an Information Disclosure Citation List and copies of the cited foreign patent documents and non-patent literature. This application was filed after June 30, 2003, and therefore, pursuant to the Official Gazette Notice dated August 5, 2003 waiving requirements under 37 C.F.R. § 1.98(a)(2)(i), this IDS is filed without copies of cited U.S. Patents and/or published applications. The Examiner is requested to consider the cited documents, make them of record, and indicate his or her consideration of the documents by initialing the enclosed Citation List adjacent the citation of each document. Please return a copy of the initialed Citation form to the Applicants' undersigned Attorney.

This IDS is being filed prior to receipt of any action letter in this case. Thus no fee is believed to be due for its filing. In the event that the Office determines that a fee is due, the Commissioner is hereby authorized to charge any such fee to the undersigned attorney's Deposit Account No. 02-4270.

Date: April 11, 2006

I hereby certify that the correspondence attached herewith is being transmitted by first class mail the Commissioner for Patents, Box 1450, Alexandria, VA

22313-1450:

Tabitha Crosier
Tabitha Crosier

4/11/06
Date

Respectfully submitted,

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Sheet 1 of 4

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| Application Number | 10/723,996 |
| Filing Date | November 26, 2003 |
| First Named Inventor | Polilli |
| Group Art Unit | 3626 |
| Examiner Name | Not Yet Assigned |
| Attorney Docket Number | 3689/18 |

U.S. PATENT DOCUMENTS

| Examiner Initials | Cite No. ¹ | U.S. Patent Document | | Name of Patentee or Applicant of Cited Document | Date of Publication of Cited Document MM-DD-YYYY | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
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| Examiner Signature | /Kristine Rapiilo/ | Date Considered | 02/11/2009 |
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